

# ALABAMA'S

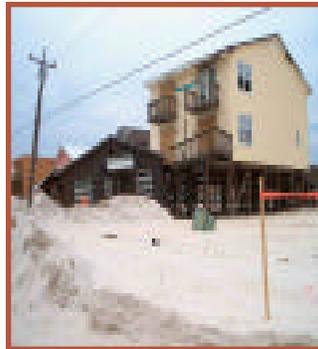
A PUBLICATION OF THE ALABAMA DEPARTMENT OF PUBLIC HEALTH

# HEALTH

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These photographs taken by public health employees illustrate the magnitude of damage and losses sustained in Gulf Shores and Baldwin County in Hurricane Ivan. But the destruction was not confined to southwest Alabama. Areas extending as far north as the Tennessee Valley suffered damage from Ivan's wrath, and public health workers came to the fore and will continue to do so as recovery efforts continue. More photos are posted on the department's Web site at [www.adph.org/environmental/](http://www.adph.org/environmental/).

## Public health team praised for efforts in preparing for and dealing with Ivan

**H**urricane Ivan affected almost all of Alabama, and department employees set out to protect the public's health during what some have called one of the worst natural disasters to strike the state ever. Employees of every classification worked extended hours under trying circumstances before, during and after the hurricane.

"I want to express our gratitude to our employees who traveled to staff shelters in South Alabama and to the environmentalists taking care of clients," said Dr. Donald Williamson, state health officer in a satellite conference to employees throughout the state. "Clearly, public health is a team with a spirit of sacrifice and volunteerism."

Preparations were made before Hurricane Ivan struck,

and activities ran the gamut. A number of public health employees temporarily relocated to aid local staff in devastated areas as a part of recovery efforts. Fortunately, health department facilities escaped severe damage although many had to be closed temporarily because of the widespread power outages. Dr. Williamson held a news conference at the Baldwin County Health Department in Robertsdale on Sept. 20.

Debriefing is planned to review public health response, to discuss ways of improving outcomes and to compare this disaster with a possible terrorist attack. Future issues of *Alabama's Health* will touch on the special efforts made by many employees during this disaster.

# Thanks to all for their support and assistance in the aftermath of Hurricane Ivan

Dear Work Family:

All staff in Public Health Areas 7 and 9 want to offer our appreciation to you for the assistance you provided during our early recovery from Hurricane Ivan. While the storm hit all counties in Areas 7 and 9, the public health response needs were greater in Area 9, and you were there to provide support. We are grateful to work with individuals who are willing to move with little notice to assist.

Whether from state, area, or county you supported in so many ways. Many physically came to the area to help us respond to a vast array of public health needs. Others continued to work in your own locations, carrying an extra load because your co-workers were assisting us. Some shared your Linc radios (what a blessing in a very difficult time). Others let us know you were concerned through phone calls and offers of help.

Ivan spared very few parts of our state. Many of you have damaged homes and lawns filled with debris. Some were impacted through family business loss. Despite this, you became our support and resource when our needs were overwhelming.

We look forward to sharing more in the months ahead. There were so many lessons learned that will help us all provide a sounder public health response should disaster strike again. For now, we just want to say thank you from the bottom of our hearts.

Sincerely,  
Ruth Underwood  
Area Administrator

## Alabama Department of Public Health

### Mission

To serve the people of Alabama by assuring conditions in which they can be healthy.

### Value Statement

The purpose of the Alabama Department of Public Health is to provide caring, high quality and professional services for the improvement and protection of the public's health through disease prevention and the assurance of public health services to resident and transient populations of the state regardless of social circumstances or the ability to pay.

The Department of Public Health works closely with the community to preserve and protect the public's health and to provide caring quality services.

# ALABAMA'S HEALTH

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Marion Wilford . . . . . Photographer

Informational materials in alternative formats will be made available upon request.

## Bus campaign educates Alabamians about prostate cancer

The Cancer Prevention Division along with the MAX (Metro Area Express) in Birmingham launched a Prostate Cancer Bus Campaign in September. The specially designed bus is a one-of-a-kind campaign and serves as a rolling billboard. The bus reads “Get the facts about prostate cancer and make a decision that is best for you.” The National Cancer Institute is also taking part in the campaign by taking calls on its 1-800-4-CANCER phone line and giving callers more information about prostate cancer.

The bus ad not only promotes awareness of prostate cancer but also acts as a resource center. Brochures are also available on the bus, and bus drivers will soon be educated about prostate cancer and can pass along information to riders.

“MAX transports over 9,000 passengers daily, the cancer bus is very visible in the community and it’s a great awareness tool. MAX is proud to be a sponsor in this event,” says David Hill, director of MAX Operations.

In 2004, it is estimated that 4,850 new cases of prostate cancer will occur in Alabama and 630 cancer deaths are expected to be attributed to prostate cancer. All men are at risk for prostate cancer, but African-American



men have a higher prostate cancer incidence and mortality rates than men of other races. Mortality rates for African-American men are twice that of white men.

Buses with standard ads promoting prostate cancer awareness are also visible in Mobile and Montgomery. Keith Wright of the Communications and Social Marketing Division, Bureau of Health Promotion and Chronic Disease, designed the ad.

## Arthritis Coalition meeting focuses on physical activity and treatment

On Sept. 14, the Alabama Arthritis Coalition held its annual meeting in Montgomery focusing this year on encouraging those with arthritis to be more physically active and continuing the work to ensure that those living with arthritis have adequate treatment.

Dr. Kenneth Saag from the University of Alabama at Birmingham began the meeting with the topic of equity of care in the state. He stated in his discussion that the burden of arthritis overall in the state is still high, with over a million people affected. Additionally, significant differences in treatment remain between those living in rural areas as opposed to those in urban areas, and between minorities and whites.

“We have work to do to try to improve equity in the state,” said Dr. Saag.

Dr. Saag also addressed the advances made in arthritis treatment such as biological therapy which can slow down the progression of such conditions as rheumatoid arthritis. The therapy allows people to move with less pain, but is very expensive so many may be prevented from utilizing it.



Shown are Susan Susanjernick, Centers for Disease Control and Prevention; Lee Ann Ramey, CDC project officer; Linda Austin, Arthritis Branch director; Dr. Kenneth Saag, UAB; and Robert Payne, CDC.

In conclusion, Dr. Saag discussed TRIP (Translating Arthritis.....continued on page 4

# Arthritis.....continued from page 3

Research into Practice), an initiative to accelerate research to treat patients more efficiently using outreach visits, computerized tools and intensive conferences.

Dr. Richard Jones, a physician at the Clinic for Rheumatic Diseases in Tuscaloosa, spoke to the coalition about alternative medicine. Dr. Jones, who defined alternative therapies as diverse medical health care systems, practices and products not presently considered part of conventional medicine, reported that over \$12 billion a year is spent on alternative medicine/therapies.

Of those surveyed who use alternative therapies, 87 percent say that they use alternative therapies because they help control the pain.

“The American College of Rheumatology recognizes alternative therapies, with caution against methods not validated. There needs to be a rational discussion about them,” said Dr. Jones.

One therapy that has made the transition from alternative to conventional is Glucosamine, which is used in osteoarthritis to slow the narrowing of joints and cartilage degeneration caused by the disease. Dr. Jones noted that use over the long term could slow the pain as well as any nonsteroid drug. Other popular alternative therapies are Vitamin D, ginger and gelatin.

The final speaker for the day was Dr. Donna Paul who emphasized the importance of physical activity in the lives of the elderly and the benefits it could have on their well being. According to Dr. Paul’s lecture, approximately 40 percent of adults do not engage in any kind of physical activity.

“It doesn’t have to be an intense, highly regimented exercise,” stated Dr. Paul. “It can be low impact exercise

on a regular basis.”

Dr. Paul suggested that people should start out with an initial goal of 30 to 45 minutes per day and then increase to 45 to 60 minutes increasing intensity as well.

Among the benefits mentioned by Dr. Paul were less risk of getting degenerative conditions and becoming completely dependent, improving muscle strength, and reducing pain.

“Past thinking has been that you should rest the joints, but in actuality you need to work them because otherwise you will have pain, stiffness, weakness and less motion,” said Dr. Paul.

Other memorable moments at the meeting were audience participation activities in PACE (people with arthritis can exercise) exercises and a guided imagery presentation.

Linda Austin, director of the Alabama Arthritis Control Program felt that the meeting was once again a success. “It’s always so great to have the coalition meet and discuss all the significant work being done in the area of arthritis in the state. Those with arthritis in the state of Alabama can feel confident that this coalition is working to make their lives better.”

For more information on the arthritis coalition, please visit the Alabama Department of Public Health’s Web site at [www.adph.org/arthritis](http://www.adph.org/arthritis).

*By TAKENYA STOKES*

## Retirements

**T**he following employees have retired from county and area health departments recently:

*Jackie Brock* - Baldwin County Health Department

*Brenda Caldwell* - Public Health Area VI

*Lee Edwards* - Coffee County Health Department

*Faye Headrick* - Jackson County Health Department

*Shirley Moon* - Lawrence County Health Department

*Barbara Wells* - Tuscaloosa County Health Department

# Parental influence and involvement are key to teens' sexual decision-making

**W**hen it comes to positively influencing teens' sexual decision-making, parents would probably be surprised to learn that they, not the media or their teens' friends, are the most influential factor.

According to the National Campaign to Prevent Teen Pregnancy's two most recent surveys, conducted between August and September 2003, titled "With One Voice: America's Adults and Teens Sound Off About Teen Pregnancy" and "The Parent Gap: Teen Pregnancy and Parental Influence," nearly half (45 percent) of teens said that parents influenced their decisions about sex more than anyone else.

An even clearer majority (59 percent) said they considered their parents role models of healthy and responsible relationships. Additionally, a vast majority (88 percent) of teens said it would be "easier" to postpone sexual activity and avoid teen pregnancy if they were able to have "more open, honest conversations" about these issues with their parents.

This illustrates the need for parents to talk with their teens early and often, clearly communicating their own sexual values, while recognizing that postponing sexual involvement until marriage is the healthiest choice for teens emotionally and physically.

So, how can parents become more effective at influencing teens' sexual decision-making? Here are some helpful tips from the Medical Institute for Sexual Health:

- Start early, work your way up to talking about sex;
- Believe in your children/teens and build their confidence;
- Look for teaching opportunities and use them;
- Relax and create an open environment for talking;
- Give accurate, age-appropriate information; and
- Anticipate the next stage before it happens.

To help equip parents to accomplish this task, specific abstinence-only educational materials such as: "Sex Q and A: Kids' Questions-Parents' Answers," "Saving Sex for Marriage-Abstinence is a Choice Worth Making," and "Encouraging Abstinence -Ten Tips for Parents" are available free upon request from the Alabama Abstinence-Only Education Program through the Alabama Department of Public Health, Bureau of Family Health Services.

Similarly, the issue of family "connectedness" has been revealed as an important factor in protecting teens.

According to the 2000 National Longitudinal Study of Adolescent Health, the largest national study of its kind ever conducted (90,000 adolescents in grades 7-12), positive parent-family relationships help prevent teens' involvement in risky behaviors, which include early sexual intercourse.

The National Campaign to Prevent Teen Pregnancy's September 2003 publication, titled "Parent Power: What Parents Need to Know and Do to Help Prevent Teen Pregnancy," also concludes "parents should recognize that a close, loving relationship with their children can be the best protection" against teen pregnancy.

To help parents take a more active role in their teens' lives, specific abstinence-only educational materials such as "Connected Parents" and "Reaching the Millennial Generation" reports are also available free upon request from the program.

According to the Centers for Disease Control and Prevention, teens contract nearly one in four of the 15 million cases of sexually transmitted diseases with which Americans will become infected this year.

"This is a very serious issue and parents needs to rise to the challenge of having open and honest discussions about saving sex for marriage," said Dr. Thomas Miller, director of the Bureau of Family Health Services. "This may be very uncomfortable at first, but it will help ensure their teens' wellbeing now and in the future."

The good news for parents is that there are numerous, outstanding and medically accurate abstinence-only educational materials available free upon request from the Alabama Abstinence-Only Education Program to equip them to be more effective with their influence and more connected through their involvement in their teens' lives-both of which are key to protecting teens from premarital sexual involvement.

In addition, the program's Web site at [www.adph.org/abstinence](http://www.adph.org/abstinence) has information on sexually transmitted diseases, teen pregnancy statistics and reasons why abstinence until marriage is the healthiest choice for teens.

To review the information, resources and request free abstinence-only educational materials from the program, please log onto [www.adph.org/abstinence](http://www.adph.org/abstinence) or contact Susan R. Stewart, RN, MSN, program director, at (334) 206-2901.

# Community leaders meet to address area cancer needs

Local community leaders gathered recently to ensure that underserved populations have access to accurate and timely cancer screening and early detection information.

On Oct. 8, the Alabama Partnership for Cancer Control in the Underserved Inc. held a conference in Gadsden to address the needs of the communities within the northeast region of the state. The goals of the conference were as follows:

- to establish a network of concerned people,
- to increase knowledge of breast and cervical cancers,
- to encourage participation in cancer research,
- to empower community members to develop plans to address cancer control, and
- to mobilize communities to eliminate cancer disparities.

The conference featured presentations from speakers on a variety of topics. Kristie Alderman, a Health Initiatives representative from the American Cancer Society, spoke of the cancer burden in the northeast part of Alabama.

Dr. Donn Brascho, a radiation oncologist from the University of Alabama School of Medicine, informed participants of the lifestyle behaviors that increase the possibility of developing cancer.

The issue of cancer and obesity was addressed by Dr. Gerald Arais, a medical oncologist who has a private practice that serves Marshall and DeKalb counties.

Dr. Isabel Scarinci, an Assistant Professor and researcher at UAB, informed the participants of the importance of cultural competency within all communities, especially the fast-growing Latino communities in Alabama's northeast.

Finally, Edwina Taylor a nurse practitioner at UAB, spoke of the importance of humor in the healing process.

The Alabama Partnership for Cancer Control in the Underserved Inc., was founded in 1996. The partnership was formed to address the high cancer rates that occur in communities that lack knowledge of cancer risk factors, and access to recommended early detection and treatment methods.

The mission of the partnership is to bring together public and private cancer, health, and community organizations to enhance the participation of the medically underserved in cancer control activities in Alabama. A total of four regional meetings will be held around the



The Alabama Partnership for Cancer Control in the Underserved Inc. held one of its four regional meetings in Gadsden recently.

state to identify community leaders interested in cancer control and determine local needs to address in the upcoming year.

The Southeastern Regional meeting will be Nov. 4 in Troy.

For more information on the Alabama Partnership contact Suzanne Reaves, Partnership Secretary, Alabama Department of Public Health, at (334) 206-5316.

*By HALEY JUSTICE, MPH*



## Children's Safety Fair offers education and guidelines for parents

Injury is the leading cause of death in Alabama's children and young adults. More people age 1-34 die as a result of injury than any other cause in our state. In response, the Montgomery Area SAFE KIDS Coalition (MASKC) and the Alabama Department of Public Health sponsored a children's safety fair at the Montgomery County Health Department with the goal of helping to protect our community's children.

The event was held in October, as part of a national effort to ensure children's health: National Child Health Month and Child Health Day. The Fair included participation from 10 local organizations which provided parents of young children important safety information including

- \* How to select and correctly install car seats
- \* How to protect children from lead poisoning
- \* Understanding diabetes
- \* Fire safety: the need for smoke alarms and home fire escape plans
- \* Playground safety
- \* Importance of learning CPR and First Aid
- \* Services for special needs children and minorities
- \* Drinking and driving risks
- \* Importance of seatbelt use
- \* Bicycle safety: using bicycle helmets and safety gear
- \* Pedestrian safety

In addition members of the SAFEKIDS coalition hosted a car seat check-up where certified child passenger safety technicians checked car seats and installed them correctly. Parents were also provided hands-on instruction of how to install the seats themselves.

People such as Hope Curry found the fair provided much needed information for her 3-year-old nephew Jabare. "I think the best part was the car seat safety check-up. I would recommend this type of fair be held around the state."

Amanda Calhoun, organizer of the event, felt that the fair achieved its goal. "Several families stopped by and received free information and incentives that promoted safety awareness. The Coalition also correctly installed child passenger safety seats and provided installation education for ten families. Thanks to the support of our community, local organizations, and coalition members, our first ever safety fair was a success. The MASKC hopes to make the Children's Safety Fair an annual event."

Participating organizations included:

- \* Diabetes Education Division, Alabama Department of Public Health
- \* Alabama Childhood Lead Poisoning Prevention Program, Alabama Department of Public Health
- \* Family Guidance Center
- \* Healthy Child Care Alabama, Alabama Department of Public Health
- \* Highway Safety Office, City of Montgomery
- \* Injury Prevention Division, Alabama Department of Public Health
- \* Minority Health, Alabama Department of Public Health
- \* Montgomery Area SAFE KIDS Coalition
- \* Montgomery Community Action Agency
- \* Special Education Action Committee

For more information on injury prevention please visit the Alabama Department of Public Health's Web site at [www.adph/injuryprevention](http://www.adph/injuryprevention).

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Carol F. Mysinger, M.Ed., M.P.A.....Director

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and Community Affairs

# Events focus attention on suicide prevention

**S**uicide remains one of the most tragic events a family and community can experience. In 2002 suicide was the eleventh leading cause of death in Alabama and the third leading cause of death for Alabamians age 15 to 24, according to the Center for Health Statistics of the Alabama



LaWanda Holland is shown at the Suicide Prevention Proclamation Ceremony Sept. 8. Ms. Holland spoke on the personal experience of suicide when she talked about the loss of her uncle Wendell. A quilt display is in the background.

Department of Public Health.

The scope of the problem is evidenced by the fact that in Alabama more people die of suicide than homicide every year. A recent survey found that 8 percent of youth in Alabama reported attempting suicide while another 12 percent had made plans to commit suicide. Suicide is also a growing problem among our elderly. Persons over 65 make up 13 percent of Alabama's population, but comprise 18 percent of all suicides.

Alabama has established a Suicide Prevention Task Force dedicated to educating the community about the warning signs of suicide, reducing the rate of suicide in our state and eliminating the stigma of suicide.

Attractive, colorful billboards featured the 1-800-SUICIDE hotline number and the message that there is hope and help available. A well-attended ceremony was held to celebrate Suicide Prevention Awareness Week in Alabama as proclaimed by Gov. Bob Riley.

Gov. Riley stated, "Suicide is among the most tragic events that could ever happen to a family or a community, yet many are unaware of suicide's toll and impact. By increasing public awareness and educating individuals about the warning signs of suicide, we can ultimately reduce the rate of suicide in our state."

State Health Officer Dr. Donald Williamson added that Alabama is ranked fifteenth in the nation in the rate of deaths from suicides. "The report of former Surgeon General David Satcher calls on us to broaden public awareness of suicide and its risk factors, and to intervene to combat this significant public health problem."

Commissioner Kathy Sawyer of the Department of Mental Health/Mental Retardation stated, "Although not everyone

who commits suicide has a mental illness, it is alarming to note that more than 90 percent of suicide victims have a serious or profound, persistent depression. Untreated depression is hazardous, particularly when mixed with substance abuse. It's time for this to stop."

The ceremony at the Capitol Auditorium featured a bagpipe processional and recessional by Terry Nobles, quilts depicting loved ones who have committed suicide, addresses by the Governor's Chief of Staff Toby Roth, Dr. Williamson, Commissioner Sawyer and three family members who discussed the suicides of their loved ones.

The Suicide Prevention Task Force has developed an Alabama Suicide Prevention Plan to encourage suicide prevention efforts to the maximum extent possible. Copies of the printed Alabama Suicide Prevention Plan were made available at the ceremony. The plan can also be accessed through the Alabama Department of Public Health Web site at [www.adph.org/suicideprevention](http://www.adph.org/suicideprevention).

Hits from the Web site were reviewed before and after the ceremony. The numbers of hits almost quadrupled between the months of August and September 2004.

## Satellite conference planned for Nov. 20

A unique satellite conference will be held on National Survivors of Suicide Day, Saturday, Nov. 20, at three locations in Alabama. This conference is designed to help friends and relatives connect with others who have survived the tragedy of suicide loss and to express and understand the powerful emotions they experience.

The program will include presentations by experts on suicide prevention and bereavement and a panel discussion on surviving suicide loss. No fees will be charged.

The live national broadcast will be from 11 a.m. to 12:30 p.m. central time in the community rooms of three local health departments as follows:

- Baldwin County Health Department, Highway 90 E, 23280 Gilbert Drive, Robertsdale
- Morgan County Health Department, 510 Cherry St. NE, Decatur
- Shelby County Health Department, 2000 County Services Drive, Pelham

For additional information, please call the national Suicide Prevention hotline number at 1-800-SUICIDE (1-800-784-2433). This toll-free line is answered 24 hours a day, seven days a week. Other information is available at the Alabama Department of Mental Health and Mental Retardation Web site at [www.mh.state.al.us](http://www.mh.state.al.us).

## Call your CSC support representative with computer problems

**W**hen you have a computer problem or want to order computer equipment, Computer Systems Center (CSC) is here to serve you. The way we can help you best is for you to use this simple procedure.

If you need some help, contact your support representative. Every office and county has a support representative. That person is the expert in your office to help solve your problem first. They can do things such as fix paper jams, reboot your computer, check for power, and other quick fixes. If support representatives can't solve your problem, they will call in your problem to the CSC Support Desk at (334) 206-5268.

The Support Desk will obtain the following information from the support representative: Name, phone number, user's name, location of the computer, the computer number, and a detailed description of your problem. If you need to order equipment or software, your support representative will call the Support Desk for you with this information plus the names of the items and funding codes or BH numbers.

The Support Desk will provide your support representative with a work order number to refer to when calling back for status. If you have not heard back from the Support Desk or another person from CSC in a few

days, we owe you an answer. Ask your support representative to follow up with us.

If you need help getting access to a system such as Lotus Notes, contact your security coordinator. This may be the same person as your support representative or it may be someone else. The security coordinator will call in the request to the CSC Support Desk and we will get the password reset or the user ID set up, or whatever else is needed.

Notice that we did not mention sending us an e-mail. We do not accept e-mail trouble calls. We have a limited number of people to serve over 2,500 users, and we have found the most efficient way to solve your problem is to use the support or security coordinator first, then to call us so we can get all the information we need to solve your problem. If you send us an e-mail, we will spend many hours communicating back and forth just trying to understand what the problem is before we can get started on it.

If you have any questions, please contact David Newman at [dnewman@adph.state.al.us](mailto:dnewman@adph.state.al.us).

*By DAVID NEWMAN*  
Computer Systems Center

## WIC speaker featured

**O**n the first Thursday of each month dedicated Public Health staff appear on the WAKA's Midday News Program's Health Segment to inform the public about important health issues and offer guidance for healthier living. To show our appreciation, each month Alabama's Health will recognize the staff members who take time out of their busy schedules to appear on the show.

The guest for October was Carolyn Battle, MS, RD, Nutrition Services Administrator for the Division of WIC in the Bureau of Family Health Services. Ms. Battle talked about the many benefits of the WIC program and healthy eating habits for women and children. Thank you Ms. Battle for a wonderful job.

If you would like to appear on the WAKA Midday News Program please contact Takenya Stokes at 334-206-7026 or e-mail at [tstokes@adph.state.al.us](mailto:tstokes@adph.state.al.us).

# Commendations

**H**ealth department employees who are listed here have received letters of commendation recently. To recognize other employees, please send letters through your supervisors or the state health officer to *Alabama's Health*.

**Catrinna Barber**  
Center for Health Statistics

From Betty Rogers  
Mobile, Ala.

**Craig Brooks, LBSW**  
Lauderdale County Health Department

**Adrian Casey, LBSW**  
DeKalb County Health Department

**Shelley Harp, LBSW**  
DeKalb County Health Department

**Beth Kimbrell, LBSW**  
Lauderdale County Health Department

From Renae Carpenter, LCSW, PIP  
Grove Hill, Ala.

**Amanda Calhoun**  
Injury Prevention Division

from Rachel S. Tears, Ph.D., M.B.A.  
Montgomery, Ala.

**Phyllis Cleveland**  
Center for Emergency Preparedness

from John E. Hooper, Jr., M.P.H.  
Columbiana, Ala.

**Shenell Fuller**  
Center for Emergency Preparedness

From Arrol Sheehan  
Montgomery, Ala.

**Sondra Reese, MPH**  
Health Promotion and Chronic Disease

From Jack Hataway, MD  
Montgomery, Ala.

**Video Communications Division**  
Health Promotion and Chronic Disease

from Gina L. Boyd  
Birmingham, Ala.

**Lynn Williams**  
Health Promotion and Chronic Disease

from Carmen Blenn  
Elba, Ala.

# Speaking of Retirement Questions Concerning DROP

**W**hat are the requirements for entering the Deferred Retirement Option Plan (DROP)?

To be eligible to participate in DROP, the member must meet all of the following requirements:  
Have at least 25 years of creditable service exclusive of sick leave (members cannot convert sick leave into creditable service to become DROP eligible)  
Be at least 55 years of age (52 for a State Policeman)  
Be eligible for service retirement  
For non-state agencies, a member's employing agency must be under the provisions of law that allows for DROP participation. Any agency that elected to participate in the ERS on or after Feb. 1, 2002, is required to participate under the DROP provisions.

**How long must I participate in DROP to receive the full benefits of my DROP account?**

The participation period for DROP is for a minimum of three years, but not more than five years. A DROP participant may terminate DROP anytime between three years and five years (for example, three years and eight months or four years and three months). The termination date must be the last day of a month.

**What funds make up my DROP account?**

Monthly Retirement Allowance: The monthly retirement allowance that normally would have been paid to the member as if he or she had retired will be placed in

*DROP.....continued on page 11*

the member's DROP account. There will be no deductions for taxes, health insurance, or Social Security.

**Member Contributions:** The 5 (regular members), 6 (full-time certified firefighters, correctional officers, and law enforcement officers) or 10 (State Police) percent member contributions will be placed in the member's DROP account.

**Interest:** The DROP account will earn interest at the same rate as active member accounts (currently 4 percent).

### **Once I complete my contractual obligation in DROP, what funds will I receive?**

The DROP participant will receive all the funds in his or her DROP account listed in the previous question.

### **What happens to my DROP account if I am laid off, become disabled or my spouse is transferred before I complete three years in DROP?**

A member who did not fulfill his or her contractual obligation due to involuntary termination, disability, or involuntary transfer of spouse in the first three years of the DROP participation period will receive all the funds in his or her DROP account.

### **Is there a penalty for withdrawing from DROP voluntarily before I complete my contractual obligation in DROP?**

Yes. A member who withdraws from service voluntarily within the first three years of DROP will forfeit the DROP contributions based on the monthly retirement allowance paid to his or her account. The DROP participant will however be eligible to receive his or her member contributions and the interest earned on the account.

### **What happens to the DROP account funds if a member dies while participating in DROP?**

If a member dies anytime during the DROP participation period, the beneficiary will receive all the funds in the DROP account. Any retirement benefit based on the retirement option selected by the member at the beginning of the DROP participation period will be paid to the beneficiary(s).

### **Can I continue to work at my same agency after I complete my contractual obligation in DROP?**

If the member does not withdraw from service after

completing his or her DROP participation, the member will resume active contributing membership in the ERS for the purpose of earning creditable service. No time spent participating in DROP will be counted as creditable service. For example, if a member had 26 years of creditable service upon entering DROP and participated in DROP for five years; then worked two more years after completing his or her contractual obligation in DROP, the member would only have 28 years of total creditable service. There would be two separate retirement allowance calculations; one based on 26 years of service and another based on two years of service.

### **How will my DROP account funds be distributed?**

No distributions from a member's DROP account will be made until the member terminates employment with any RSA participating agency.

DROP participants have one of two ways to distribute the funds in their DROP account:

Receive a lump sum-payment of the total DROP account balance less the required 20 percent federal income tax withholding. No portion of the distribution is subject to state of Alabama income tax.

Rollover the account balance to a traditional IRA, another employer retirement plan, a 403(b) Tax Sheltered Annuity, or a governmental 457(b) plan that accepts rollovers. The RSA-1 Deferred Compensation Plan accepts rollovers from your DROP account beginning Jan. 1, 2005.

### **How can I receive more information about DROP?**

Contact the ERS at 1-800-214-2158, extension 399. More information about DROP can be found in your ERS Member Handbook and DROP Handbook, both of which along with DROP forms are on our Web site at [www.rsa.state.al.us](http://www.rsa.state.al.us).

October is National Liver Awareness Month, National Down Syndrome Awareness Month, Celiac Sprue Awareness Month, National Breast Cancer Awareness Month, National Dental Hygiene Month, National Lupus Awareness Month, National Spina Bifida Awareness Month, Rett Syndrome Awareness Month and National Brain Injury Awareness Month.



# Calendar of Events



**October 26**

Bureau of Family Health Services Protocol Update, 2-3 p.m. For more information contact Laurie Stout, (334) 206-2905.



**October 27**

Fall Prevention in Home Care, Home Health Aides and Home Attendants, 2-4 p.m. For more information contact Brenda Elliott, (334) 347-2664, extension 402.



**October 29**

Early Intervention, 10 a.m.-12 noon. For more information contact Carolyn Griggs, (334) 206-2943.

**November 3-5**

Sixteenth Alabama AIDS Symposium, Riverview Plaza Hotel, Mobile. For more information contact Brenda Cummings, (334) 206-5364 or [bcummings@adph.state.al.us](mailto:bcummings@adph.state.al.us). Information also is available at [www.adph.org/aids](http://www.adph.org/aids).

**November 6-10**

American Public Health Association Annual Meeting, Washington, D.C.

**November 16**

Modeling for Bioterrorism Vaccines, 12 noon-1:30 p.m. For more information contact Video Communications, (334) 206-5618.



**November 17**

Public Health Staff Development, 2-4 p.m., For more information contact Michele Jones, (334) 206-5655.



**November 18**

Parkinson's Disease Update, Home Health Aides and Home Attendants Training, 2-4 p.m. For more information contact Brenda Elliott, (334) 347-2664, extension 402.

**November 18**

Great American Smokeout



**November 20**

National Survivors of Suicide Day, 11 a.m. to 12:30 p.m., health department community rooms in Robertsdale, Decatur and Pelham. For more information, please call the national Suicide Prevention hotline number, 1-800-SUICIDE (1-800-784-2433).

**December 8**

Abnormal Pap Smears, Public Health Staff Development, 2-4 p.m. For more information contact Annie Vose, (334) 206-2959.

**December 9**

Crisis and Emergency Risk Communication by Leaders for Leaders - Part 1 of 2. For more information contact Video Communications, (334) 206-5618.